

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 S. First St., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources

Form C-104  
Revised August 1, 2011

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Submit one copy to appropriate District Office

☐ AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address Cimarex Energy Co. 600 N. Marienfeld St., Ste. 600 Midland, TX 79701		<sup>2</sup> OGRID Number 215099
		<sup>3</sup> Reason for Filing Code/ Effective Date NW3/13/15
<sup>4</sup> API Number 30 -025-42094	<sup>5</sup> Pool Name Diamondtail; Bone Spring	<sup>6</sup> Pool Code 17644
<sup>7</sup> Property Code 39203	<sup>8</sup> Property Name Cuervo Federal	<sup>9</sup> Well Number 26H

**II. <sup>10</sup> Surface Location**

UL or lot no. A	Section 14	Township 23S	Range 32E	Lot Idn	Feet from the 372	North/South Line North	Feet from the 835	East/West line East	County Lea
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**<sup>11</sup> Bottom Hole Location**

UL or lot no. P	Section 14	Township 23S	Range 32E	Lot Idn	Feet from the 570	North/South line South	Feet from the 444	East/West line East	County Lea
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date 3/18/15	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
21778	Sunoco Inc. R & M P O Box 2039; Tulsa OK	
226737	DCP Mistream 370 17th St, Ste 2500; Denver CO	

**IV. Well Completion Data**

<sup>21</sup> Spud Date 1/1/15	<sup>22</sup> Ready Date 3/13/15	<sup>23</sup> TD 14008	<sup>24</sup> PBDT 14008	<sup>25</sup> Perforations 9500-13980	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2	13 3/8	1369	1036		
12 1/4	9 5/8	5000	1712		
8 3/4 & 8 1/2	5 1/2	14008	1990 TOC @ 2110		
	2 3/8	9020			

**V. Well Test Data**

<sup>31</sup> Date New Oil 3/14/15	<sup>32</sup> Gas Delivery Date 3/18/15	<sup>33</sup> Test Date 3/21/15	<sup>34</sup> Test Length 24 hrs	<sup>35</sup> Tbg. Pressure 600	<sup>36</sup> Csg. Pressure 190
<sup>37</sup> Choke Size 24	<sup>38</sup> Oil 184	<sup>39</sup> Water 1519	<sup>40</sup> Gas 218		<sup>41</sup> Test Method

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.  
Signature: *Aricka Easterling*

Printed name:  
Aricka Easterling

Title: Regulatory Analyst

E-mail Address: aeasterling@cimarex.com

Date:  
4/16/15

Phone:  
918-560-7060

OIL CONSERVATION DIVISION	
Approved by:	<i>[Signature]</i>
Title:	Petroleum Engineer
Approval Date:	04/04/15
<div>recomp _____ Add New Well _____ Cancel Well _____ Create Pool _____ E-PERMITTING -- New Well _____ Comp <i>PA</i> P&amp;A _____ TA _____ CSNG <i>PA</i> Loc Chng _____ Add New Well _____</div>	

MAY 05 2015

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBS OGD

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

APR 23 2015

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

RECEIVED

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM84729
2. Name of Operator CIMAREX ENERGY COMPANY		6. If Indian, Allottee or Tribe Name
Contact: ARICKA EASTERLING E-Mail: aeasterling@cimarex.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 202 S CHEYENNE AVE, SUITE 1000 TULSA, OK 74103	3b. Phone No. (include area code) Ph: 918-560-7060	8. Well Name and No. CUERVO FEDERAL 26H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 14 T23S R32E NENE 372FNL 835FEL		9. API Well No. 30-025-42094
		10. Field and Pool, or Exploratory DIAMONDTAIL
		11. County or Parish, and State LEA COUNTY, NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Completion:

2/15/15 - Test csg to 8000 for 30 min. good test. TOC @ 2110'  
2/25/15 to 3/3/15 - perf avalon @ 9500'-13980', 864 holes. Frac w/ 6,949,067 gal total fluid & 6,830,918 # sand.  
3/4/15 to 3/7/15 - mill plugs. wash to PBTD @ 14005. Flow well.  
3/10/15 - RIH w/ packer set 2 9037, set tbg @ 9020. GLV's @ 1614, 2728, 3350, 4039, 4727, 5382, 6036, 6626, 7249, 7839, 8429, 8987.  
3/13/15 - Turn well to Production

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #298440 verified by the BLM Well Information System For CIMAREX ENERGY COMPANY, sent to the Hobbs</b>	
Name (Printed/Typed) ARICKA EASTERLING	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 04/16/2015

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBS OCD

APR 23 2015

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other		5. Lease Serial No. NMNM84729	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____		6. If Indian, Allottee or Tribe Name	
2. Name of Operator CIMAREX ENERGY COMPANY		7. Unit or CA Agreement Name and No.	
Contact: ARICKA EASTERLING E-Mail: aeasterling@cimarex.com		8. Lease Name and Well No. CUERVO FEDERAL 26H	
3. Address 202 S CHEYENNE AVE, SUITE 1000 TULSA, OK 74103		9. API Well No. 30-025-42094	
3a. Phone No. (include area code) Ph: 918-560-7060		10. Field and Pool, or Exploratory DIAMONDTAIL	
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At surface NENE 372FNL 835FEL At top prod interval reported below NENE 372FNL 835FEL At total depth SESE 570FSL 444FEL		11. Sec., T., R., M., or Block and Survey or Area Sec 14 T23S R32E Mer	
14. Date Spudded 01/01/2015		12. County or Parish LEA	
15. Date T.D. Reached 01/23/2015		13. State NM	
16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 03/13/2015		17. Elevations (DF, KB, RT, GL)* 3470 GL	
18. Total Depth: MD TVD 14008 9795		19. Plug Back T.D.: MD TVD 14005	
20. Depth Bridge Plug Set: MD TVD		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) N/A	
22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)			

## 23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	48.0		1369		1036			122
12.250	9.625 J55	40.0		5000		1712			70
8.500	5.500 L80	20.0		14008		1990		2110	0

## 24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2.375	9020	9037						

## 25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) AVALON	9500	13980	9500 TO 13980	0.460	864	OPEN
B)						
C)						
D)						

## 26. Perforation Record

## 27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
9500 TO 13980	FRAC WITH 6,944,067 GAL FRAC FLUID & 6,830,918 # SAND.

## 28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
03/11/2015	03/21/2015	24	→	184.0	218.0	1519.0	41.5		GAS LIFT
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
24	SI 600	190.0	→	184	218	1519	1185	POW	

## 28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #299040 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

## 28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

## 28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

29. Disposition of Gas(Sold, used for fuel, vented, etc.)  
CAPTURED

## 30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top Meas. Depth
BELL CANYON	4980	5835	WATER	RUSTLER	1208
CHERRY CANYON	5835	7180	WATER	TOP OF SALT	1346
BONE SPRING	8750	9975	WATER, OIL, GAS	DELAWARE	4925
				BONE SPRING	8824

## 32. Additional remarks (include plugging procedure):

## 33. Circle enclosed attachments:

- |   |                    |               |                       |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.)     | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis   | 7. Other:     |                       |

## 34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):

**Electronic Submission #299040 Verified by the BLM Well Information System.  
For CIMAREX ENERGY COMPANY, sent to the Hobbs**

Name (please print) ARICKA EASTERLINGTitle REGULATORY ANALYST

Signature \_\_\_\_\_ (Electronic Submission)

Date 04/22/2015

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\***